

## ISSUE SLIP STAPLE AREA (for additional cross references)

SCWS 700

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>	Rachel		10-01-01
<b>O.I.P.E. CLASSIFIER</b>			10-10-01
<b>FORMALITY REVIEW</b>	CTH	744	10-16-01
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 · ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/16/01
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12	✓	✓	
13	✓	✓	
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15	✓	✓	
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If more than 150 claims or 10 actions  
staple additional sheet here

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PPS  
10/16/01